

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Seung-Taek HYON                      Examiner: Khai Minh NGUYEN  
Serial No.: 10/002,919                      Art Unit: 2617  
Filed: November 15, 2001                      Date: March 3, 2009  
For: EMOTICON INPUT METHOD FOR MOBILE TERMINAL

Mail Stop A.F.  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

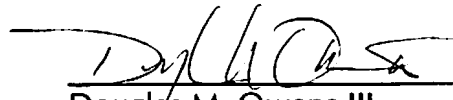
- ☐ Small entity status of this application under 37 C.F.R. §§1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity under 37 C.F.R. §§1.9 and 1.27 is enclosed.
- ☒ No additional fee is required.

| For  | Claims Remaining<br>After Amendment | Highest No.<br>Previously<br>Paid For | Present<br>Extra | Rate<br>(Small<br>Entity) | Addit.<br>Fee | Rate   | Addit.<br>Fee |
|--|-------------------------------------|---------------------------------------|------------------|---------------------------|---------------|--------|---------------|
| TOTAL CLAIMS*  | 19                                  | 27                                    | 0                | x 26 =                    | \$0           | x 52 = | \$0           |
| INDEPENDENT<br>CLAIMS  | 3                                   | 4                                     | 0                | x110 =                    | \$0           | x220 = | \$0           |
| <input type="checkbox"/> First Presentation<br>of Multiple Dep.<br>Claim |                                     |                                       |                  | 195                       |               | 390    | \$0           |

\* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.  
\*\* If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".  
\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge Deposit Account No. 50-4053 in the amount of \$\_\_\_\_. Two (2) copies of this sheet are enclosed.
- ☐ A check in the amount of \$\_\_ is enclosed.
- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. §§1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-4053. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-4053 therefor.

Respectfully submitted,

  
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**APPLICATION NO.:** 10/002,919      **EXAMINER:** Khai Minh NGUYEN  
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**AMENDMENT**

Sir:

In response to the Office Action of the United States Patent and Trademark Office dated December 3, 2008, please consider the following amendments and remarks.